

Please type a plus sign (+) inside this box →

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No.	12636-303.301
		First Inventor or Application Identifier	Rajashree Joshi-Hangal
		Title	Method For Preparing And Using Polyoxyethylated Castor Oil in Pharmaceutical Compositions
		Express Mail Label No.	EV 3334887734 US

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.		<b>ADDRESS TO:</b> Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages <u>31</u> ] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed-Sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Detailed Description of the Drawings - Detailed Description - Claim(s) 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>3</u> ] 5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages <u>12</u> ] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		7. <input type="checkbox"/> CD-Rom or CD-R in duplicate, large table or Computer program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CFR) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statement verifying identity of above copies	
<b>ACCOMPANYING APPLICATION PARTS</b>			
9. <input checked="" type="checkbox"/> Assignment Papers (4) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> 6 IDS Citations Statement (IDS) PTO-1449 (cited - no copies submitted) 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent 17. <input type="checkbox"/> Other:			

18. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information below in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76.

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. 10/306,824 Prior application information: Examiner Deborah Carr Group/Art Unit: 1621

**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

<b>19. CORRESPONDENCE ADDRESS</b>			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		021971	or <input type="checkbox"/> Correspondence address below
(Insert Customer No. or Attach bar code label here)			
Name			
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CITY	STATE	ZIP CODE	
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Name (Print/Type)	Shirley Chen, Ph.D.	Registration No. (Attorney/Agent)	44,608
Signature		Date	February 18, 2004

22141 U.S.PTO

101782521

021804

021804

16152 U.S. PTO

PTO/SB/17 (6/99)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$1,253.00)

## Complete if Known

Application Number	Unassigned
Filing Date	Herewith
First Named Inventor	Rajashree Joshi-Hangal
Examiner Name	Unassigned
Group/Art Unit	Unassigned
Attorney Docket Number	12636-303.301

## METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 23-2415 (Docket No. 12636-303.301)

Deposit Account Name Wilson Sonsini Goodrich & Rosati

- ☒ Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

2. ☐ Payment Enclosed:

☐ Check ☐ Money Order ☐ Other

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	420	216	210	Extension for reply within second month	
117	950	217	475	Extension for reply within third month	
118	1,480	218	740	Extension for reply within fourth month	
128	2,010	228	1,005	Extension for reply within fifth month	
119	330	219	165	Notice of Appeal	
120	330	220	165	Filing a brief in support of an appeal	
121	290	221	145	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,330	241	665	Petition to revive - unintentional	
142	1,330	242	665	Utility issue fee (or reissue)	
143	480	243	240	Design issue fee	
144	640	244	320	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	160.00
146	770	246	385	Filing a submission after final rejection (37 CFR 1.129(a))	
149	770	249	385	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify)					
Other fee (specify)					
55/110 Terminal Disclaimer					

SUBTOTAL (1) (\$385.00)

### 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
70	-20** = 50	9.00	450.00
Independent Claims	9	-3** = 6	43.00 = 258.00
Multiple Dependent			

\*\*or number previously paid, if greater; For Reissues, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	86	202	43	Independent claims in excess of 3
104	290	204	145	Multiple dependent claim, if not paid
109	86	209	43	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$708.00)

\* Reduced by Basic Filing Fee Paid SUBTOTAL (3) \$160.00

## SUBMITTED BY

Name (Print/Type)	Shirley Chen, Ph.D.	Registration No. (Attorney/Agent)	44,608	Telephone	650-493-9300
Signature		Date	February 18, 2004	Customer No.	021971

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22213-1450

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